Exhibit B

Invoices

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INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 1303626

SIEMENS REFERENCE#: 335013360

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL **RECEIVING PO# 1303626** 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE DATE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
971564856	12/21/12	128.18	Net 60 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
004	2 PC	10309073 LUER CAPILLARY (PK OF 20) Original Material: 4142460 Price Source:HSA Delivery # 1102506556, Shipped on 12/19/12	64.09	128.18	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		128.18 128.18	

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

Buyer's acceptance of the goods covered by this invoice shall constitute acceptance by the buyer of all terms and conditions of sale stated above and in the Standard Conditions of Sale.

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

Invoices Pg 3 of 35

INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 0000008715 SIEMENS REFERENCE#: 340255341

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL JOANNE /RESPIRATORY 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE DATE	TOTAL (USD) PAYMENT TERMS	INCO TERMS
971863274	05/02/13	251.70 Net 60 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	2 PC	10316535 CVM Original Material: 116189 Price Source:HSA Delivery # 1102901934, Shipped on 04/29/13	85.85	171.70	
		MERCHANDISE: SHIPPING AND HANDLING: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		171.70 80.00 251.70	
	;				

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Invoices Pg 4 of 35

INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 1303626 SIEMENS REFERENCE#: 340269328

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL RECEIVING PO# 1303626 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE DATE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
971883026	05/10/13	1,588.00	Net 60 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	2 PC	10491449 RP500 MCART LAC 750 TEST Price Source:MNO Delivery # 1102934226, Shipped on 05/08/13	794.00	1,588.00	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		1,588.00 1,588.00	

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Invoices

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INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 1303626 SIEMENS REFERENCE#: 340306063

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL RECEIVING PO# 1303626 241 NORTH RD POUGHKEEPSIE NY 12601

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INVOICE	INVOICE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
NUMBER	DATE		D	요즘 그 그 그 그 그 그 가 하는 사람이 원생한다.
NOMIDEK	DAIL	이 몸으로 하다 그는 그렇게 스타양상 종선의 무대상이 하셨다.		불발하다 하는 사람들은 문화가 함께 본 호텔 문화
		eli in migri zuuri gu erra TAB Y (Alafa Reli i	그는 그리고 그 그 그 그들은 생활하게 끊어 걸음.	
971947257	l 06/08/13 l	1.588.00	Net 60 Davs	CIF Customer dock
		\$45		

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	2 PC	10491449 RP500 MCART LAC 750 TEST Price Source:MNO Delivery # 1103014546, Shipped on 06/05/13	794.00	1,588.00	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		1,588.00 1,588.00	,

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INVOICE

Invoices Pg 6 of 35

CUSTOMER PO#: 1303626

SIEMENS REFERENCE#: 340338357

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SIEMENS Siemens Healthcare Diagnostics

RETURN SERVICE REQUESTED

3090 Premiere Parkway

Duluth, GA 30097

Suite 600

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE DATE	TOTAL (USD) P	AYMENT TERMS	INCO TERMS
972002060	-07/03/13	1,588.00	Net 60 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	PC	10491449 RP500 MCART LAC 750 TEST Price Source:MNO Delivery # 1103088306, Shipped on 07/02/13	794.00	1,588.00	
	!	MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		1,588.00 1,588.00	

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Invoices

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INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 1303626

SIEMENS REFERENCE#: 335013360

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL RECEIVING PO# 1303626 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE DATE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
972002943	07/03/13	877.20	Net 30 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
002	2 PC	10310323 AQC CARTRIDGE KIT Original Material: 120241 Contract#:400019353, Price Source:CNT Delivery # 1103087581, Shipped on 07/02/13	256.70	513.40	
003	2 PC	10310310 WASH/WASTE CART PKG (3) Original Material: 118677 Contract#:400019353, Price Source:CNT Delivery # 1103087581, Shipped on 07/02/13	181.90	363.80	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		877.20 877.20	

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INVOICE

CUSTOMER PO#: 1303626

SOLD-TO#: 10182

PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SIEMENS Siemens Healthcare Diagnostics

RETURN SERVICE REQUESTED

3090 Premiere Parkway

Suite 600 Duluth, GA 30097

SHIP TO ACCOUNT NUMBER: 87155

SIEMENS REFERENCE#: 335013360

ST FRANCIS HOSPITAL RECEIVING PO# 1303626 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE INVOICE NUMBER DATE	TOTAL (USD)	PAYMENT TERMS INCO TERMS
972002944 07/03/13	128.18	Net 60 Days CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
004	2 PC	10309073 LUER CAPILLARY (PK OF 20) Original Material: 4142460 Price Source:HSA >>Data not available at time of shipment	64.09	128.18	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		128.18 128.18	

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Invoices

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INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 1303626

SIEMENS REFERENCE#: 335013360

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD

POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL RECEIVING PO# 1303626 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE INVOICE NUMBER DATE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
972030070 07/15/13	1,754.40	Net 30 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
002	4 PC	10310323 AQC CARTRIDGE KIT Original Material: 120241 Contract#:400019353, Price Source:CNT >>Data not available at time of shipment	256.70	1,026.80	
003	4 PC	10310310 WASH/WASTE CART PKG (3) Original Material: 118677 Contract#:400019353, Price Source:CNT >>Data not available at time of shipment	181.90	727.60	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		1,754.40 1,754.40	

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INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 1303626 SIEMENS REFERENCE#: 335013360

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL **RECEIVING PO# 1303626** 241 NORTH RD POUGHKEEPSIE NY 12601

	IVOICE INVOICE UMBER DATE	TOTAL (USD)	PAYMENT	T TERMS	1	NCO TERMS	
97	2030071 07/15/13	256.36	Net 60	Days	CIF	Customer dock	

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
004	4 PC	10309073 LUER CAPILLARY (PK OF 20) Original Material: 4142460 Price Source:HSA >>Data not available at time of shipment	64.09	256.36	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		256.36 256.36	

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Please remit all checks to the following address: Siemens Healthcare Diagnostics, P.O. Box 121102, Dallas, TX 75312-1102. Please make electronic payments to Bank of New York Mellon as follows: Wires: ABA 043000261, account name Siemens Healthcare Diagnostics, Account Number 0102453.

PAGE 1 OF 1 01/06/14 14:46

Invoices Pg 11 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

CREDIT MEMO

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 1303626 SIEMENS REFERENCE#: 666085111

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE	INVOICE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
		TOTAL (USD)	LATIMINI TIMININ	THE TRUE THE PARTY OF THE PARTY
NUMBER	DATE		[基本] (新新新新新的) (新古斯) · · · · · · · · · · · · · · · · · · ·	
		VSARATROZSZEGIJE	[일본] - 프로젝션 및 1 - 리듬스트를 보고 있다. 그리고 말했다.	
996061744	07/25/13	-218.04	Net 30 Days	CIF Customer dock
7,70001,744	07/25/15	1 21007		- Customor dook

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	1 PC	10323175 RP405 MEAS CART BG-COOX 750 Original Material: 130520 Price Source:MNO	218.04	218.04	
		MERCHANDISE: TOTAL(USD): CREDIT INVOICE. DO NOT PAY.		-218.04 - 218.04	
		Ordering Party Tel# : (914) 471-2000			
		Please note that this credit may be de otherprice reduction that must be prop appropriatelyreflected in any costs cl you to Medicare, Medicaid or other heal	erly disclos aimed or cha	ed and rges made by	r

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Invoices Pg 12 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

CREDIT MEMO

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 1303626 SIEMENS REFERENCE#: 666085111

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE DATE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
996061745	07/25/13	-193.34	Due Upon Receipt	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
002	2 PC	10341179 WASH/WASTE CART PKG Original Material: 118678 Price Source:MNO	96.67	193.34	
		MERCHANDISE: TOTAL(USD): CREDIT INVOICE. DO NOT PAY.		-193.34 -193.34	
		Ordering Party Tel# : (914) 471-2000			
		Please note that this credit may be de otherprice reduction that must be prop appropriatelyreflected in any costs cl you to Medicare, Medicaid or other heal	erly disclos aimed or cha	ed and rges made by	r

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Invoices Pg 13 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

CREDIT MEMO

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 1303626

SIEMENS REFERENCE#: 666085112

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

	OICE TOTAL (USD)	PAYMENT TERMS	INCO TERMS
996061746 07/2	25/13 -645.37	Due Upon Receipt	CIF Customer dock

QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
1 PC	10327073 RP405 MEAS CART BG-COOX 400 Original Material: 130521 Price Source:MNO	452.03	452.03	
2 PC	10341179 WASH/WASTE CART PKG Original Material: 118678 Price Source:MNO	96.67	193.34	
	MERCHANDISE: TOTAL(USD): CREDIT INVOICE. DO NOT PAY.		-645.37 -645.3 7	
	Ordering Party Tel#: (914) 471-2000			
	otherprice reduction that must be prop appropriatelyreflected in any costs cl	erly disclos aimed or cha	ed and	r
	UOM 1 PC	DESCRIPTION 1 10327073 PC RP405 MEAS CART BG-COOX 400 Original Material: 130521 Price Source:MNO 2 10341179 PC WASH/WASTE CART PKG Original Material: 118678 Price Source:MNO MERCHANDISE: TOTAL(USD): CREDIT INVOICE. DO NOT PAY. Ordering Party Tel#: (914) 471-2000 Please note that this credit may be de otherprice reduction that must be prop appropriately reflected in any costs cl	DESCRIPTION 1 10327073 RP405 MEAS CART BG-COOX 400 Original Material: 130521 Price Source:MNO 2 10341179 PC WASH/WASTE CART PKG Original Material: 118678 Price Source:MNO MERCHANDISE: TOTAL(USD): CREDIT INVOICE. DO NOT PAY. Ordering Party Tel#: (914) 471-2000 Please note that this credit may be deemed a discontent of the property disclosed the property disclo	TOM DESCRIPTION DESCRIPTION PRICE PRICE 1 10327073 RP405 MEAS CART BG-COOX 400 Original Material: 130521 Price Source:MNO 2 10341179 PC WASH/WASTE CART PKG Original Material: 118678 Price Source:MNO MERCHANDISE: TOTAL(USD): CREDIT INVOICE. DO NOT PAY. Ordering Party Tel#: (914) 471-2000 Please note that this credit may be deemed a discount, rebate o otherprice reduction that must be properly disclosed and appropriately reflected in any costs claimed or charges made by

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Invoices Pg 14 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 335019256

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

	The second second	DAYAGON MEDIAG
INVOICE INVOICE	TOTAL (USD)	PAYMENT TERMS INCO TERMS
NUMBER DATE		[]
972062276 07/29/13	877.20	Net 30 Days CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	2 PC	10310323 AQC CARTRIDGE KIT Original Material: 120241 Contract#:400019353, Price Source:CNT Delivery # 1103160864, Shipped on 07/26/13	256.70	513.40	
005	PC	10310310 WASH/WASTE CART PKG (3) Original Material: 118677 Contract#:400019353, Price Source:CNT Delivery # 1103160864, Shipped on 07/26/13	181.90	363,80	,
1		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		877.20 8 77. 20	

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Invoices Pg 15 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 340371084

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE INVOICE TOTAL (USD) PAYMENT TERMS INCO TERMS	
NUMBER DATE	
네트램([설립하다 : T.] [항공기회회회 :] - [사고, [상고, [상고] 왕고, [사고, [사고, [사고, [사고, [사고, [사고, [사고, [사	
972065964 07/31/13 1,588.00 Net 30 Days CIF Customer dock	

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	2 PC	10491448 RP500 MCART LAC 400 TEST Contract#:400019353, Price Source:CNT Delivery # 1103162025, Shipped on 07/29/13	794.00	1,588.00	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		1,588.00 1,588.00	

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13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit Invoices Pg 16 of 35

INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 335019256

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE INVOICE NUMBER DATE		PAYMENT TERMS	INCO TERMS
972079499 08/05/1	3 128.18	Net 60 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
004	2 PC	10309073 LUER CAPILLARY (PK OF 20) Original Material: 4142460 Price Source:HSA >>Data not available at time of shipment	64.09	128.18	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		128.18 128.18	

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

Buyer's acceptance of the goods covered by this invoice shall constitute acceptance by the buyer of all terms and conditions of sale stated above and in the Standard Conditions of Sale.

Invoices Pg 17 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 **Duluth, GA 30097** RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 335019256

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

	non-seatorical and the complete in the		The state and the state of the	An emphision for	The Arabana Albana San Cara
INVOICE INVOICE	TOTAL (USD)		PAYMENT TERM	MS	INCO TERMS
NUMBER DATE	[- 그 일본급 :	l	하고만 수업체를 받는다.		그 그 아이를 걸었다면 하는 사람들이 되었다.
		atti sa	그 불가 되겠으셨다고 그 그 그		및 T '영화보통하였다. 호텔, 호텔이
972124220 08/24/13	1,588.00		Net 30 Days	CI	F Customer dock
7/2127220 00/27/13	1,500.00	Diday Y	1,01,30,24,3		

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
003	2 PC	10491448 RP500 MCART LAC 400 TEST Contract#:400019353, Price Source:CNT Delivery # 1103237662, Shipped on 08/23/13	794.00	1,588.00	
		MERCHANDISE: TOTAL(USD):		1,588.00 1,588.00	
		Ordering Party Tel# : (914) 471-2000			
					:

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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Invoices Pg 18 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

INVOICE

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 335019256

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

TATALOTOE DATAOLOE	TOTAL (HCD)	PAYMENT TERMS	INCO TERMS
INVOICE INVOICE	TOTAL (USD)	FAINENT LEMNO	TICO TEVINO
NUMBER DATE			
972134246 08/29/13	877.20	Net 30 Days	CIF Customer dock
772134240 00/23/13	I S C C C C C C C C C C C C C C C C C C	1,0,000	CH Customor dook

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	2 PC	10310323 AQC CARTRIDGE KIT Original Material: 120241 Contract#:400019353, Price Source:CNT Delivery # 1103246652, Shipped on 08/27/13	256.70	513.40	
005	2 PC	10310310 WASH/WASTE CART PKG (3) Original Material: 118677 Contract#:400019353, Price Source:CNT Delivery # 1103246652, Shipped on 08/27/13	181.90	363.80	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		877.20 877.20	

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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Invoices Pg 19 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

INVOICE

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 335019256

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE	INVOICE	TOTAL (USD)	PAYMENT TERMS	S INCO TERMS
NUMBER	DATE			
972183486	09/20/13	877.20	Net 30 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	2 PC	10310323 AQC CARTRIDGE KIT Original Material: 120241 Contract#:400019353, Price Source:CNT Delivery # 1103315235, Shipped on 09/19/13	256.70	513.40	
005	2 PC	10310310 WASH/WASTE CART PKG (3) Original Material: 118677 Contract#:400019353, Price Source:CNT Delivery # 1103315235, Shipped on 09/19/13	181.90	363.80	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		877.20 877.20	

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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Invoices Pg 20 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 335019256

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE	INVOICE	TOTAL (USD)	PAYMENT TERMS		INCO TERMS
NUMBER	DATE			3	
972185197	09/20/13	1,588.00	Net 30 Days) i	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
003	PC	10491448 RP500 MCART LAC 400 TEST Contract#:400019353, Price Source:CNT Delivery # 1103316203, Shipped on 09/19/13	794.00	1,588.00	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		1,588.00 1,588.00	

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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Invoices Pg 21 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 340441349

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL DEL FRTDSK PG AURELIO OR JAQUITA RT 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER		TOTAL (USD)	PAYMENT TERMS	INCO TERMS
972187510	09/21/13	794.00	Net 30 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	1 PC	10491448 RP500 MCART LAC 400 TEST Contract#:400019353, Price Source:CNT Delivery # 1103321064, Shipped on 09/20/13	794.00	794.00	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		794.00 794.00	

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 0000014752 **SIEMENS REFERENCE#: 340450678**

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL RECEIVING 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE DATE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
972211557	10/03/13	165.85	Net 60 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	1 PC	10316535 CVM Original Material: 116189 Price Source:HSA Delivery # 1103355700, Shipped on 10/02/13	85.85	85.85	
		MERCHANDISE: SHIPPING AND HANDLING: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		85.85 80.00 165.85	
	·				

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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Invoices Pg 23 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 335019256

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE INVOICE NUMBER DATE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
972228126 10/10/13	7 94.00	Net 30 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
003	1 PC	10491448 RP500 MCART LAC 400 TEST Contract#:400019353, Price Source:CNT Delivery # 1103379823, Shipped on 10/09/13	794.00	794.00	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		794.00 7 94.00	
			;		

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Pg 24 of 35 Invoices

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INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 335019256

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE

241 NORTH RD POUGHKEEPSIE NY 12601 **SHIP TO ACCOUNT NUMBER: 87155**

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE DATE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
972228127	10/10/13	128.18	Net 60 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
004	2 PC	10309073 LUER CAPILLARY (PK OF 20) Original Material: 4142460 Price Source:HSA Delivery # 1103379823, Shipped on 10/09/13	64.09	128.18	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		128.18 128.18	

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13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

Invoices Pg 25 of 35

CREDIT MEMO

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: MCP 1303626 **SIEMENS REFERENCE#: 666090743**

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE INVOICE DATE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
996066189 10/10/13	-426.30	Due Upon Receipt	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	1 PC	10327073 RP405 MEAS CART BG-COOX 400 Original Material: 130521 Price Source:MNO	329.63	329.63	
002	1 PC	10341179 WASH/WASTE CART PKG Original Material: 118678 Price Source:MNO	96.67	96.67	
		MERCHANDISE: TOTAL(USD):		-426.30 - 426.30	
		CREDIT INVOICE. DO NOT PAY. Ordering Party Tel#: (914) 471-2000			
		Please note that this credit may be de otherprice reduction that must be prop appropriatelyreflected in any costs cl you to Medicare, Medicaid or other heal	erly disclomaimed or cha	ed and rges made by	r.

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit Invoices Pg 26 of 35

CREDIT MEMO

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: MCP 1303626 SIEMENS REFERENCE#: 666090744

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE DATE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
996066190	10/10/13	-219.06	Due Upon Receipt	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	1 PC	10327073 RP405 MEAS CART BG-COOX 400 Original Material: 130521 Price Source:MNO	122.39	122.39	
002	1 PC	10341179 WASH/WASTE CART PKG Original Material: 118678 Price Source:MNO	96.67	96.67	
		MERCHANDISE: TOTAL(USD):		-219.06 - 219.06	
		CREDIT INVOICE. DO NOT PAY.		,	
		Ordering Party Tel# : (914) 471-2000			
		Please note that this credit may be de otherprice reduction that must be prop appropriatelyreflected in any costs cl you to Medicare, Medicaid or other heal	erly disclos aimed or cha	ed and rges made by	<u>C</u>
			th insurers		

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Invoices Pg 27 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

CREDIT MEMO

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: MCP 1303626 SIEMENS REFERENCE#: 666090747

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE INVOICE NUMBER DATE	TOTAL (USD)	PAYMENT TERMS INCO TERMS
996066191 10/10/13	-183.59	Net 30 Days CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	1 PC	10323175 RP405 MEAS CART BG-COOX 750 Price Source:MNO	183.59	183.59	
	•	MERCHANDISE: TOTAL(USD): CREDIT INVOICE. DO NOT PAY.		-183.59 - 183.5 9	
		Ordering Party Tel# : (914) 471-2000			
		Please note that this credit may be de otherprice reduction that must be prop appropriatelyreflected in any costs cl you to Medicare, Medicaid or other heal	erly disclos aimed or cha	ed and	<u>r</u>

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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Pg 28 of 35 Invoices

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit **CREDIT MEMO**

> CUSTOMER PO#: MCP 1303626 **SIEMENS REFERENCE#:** 666090747

SOLD-TO#: 10182 **PAYER#:** 10182

SIEMENS Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600

Duluth, GA 30097 RETURN SERVICE REQUESTED

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE TOTAL (USD)	PAYMENT TERMS	INCO TERMS
996066192	10/10/13 -96.67	Due Upon Receipt	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
002	1 PC	10341179 WASH/WASTE CART PKG Original Material: 118678 Price Source:MNO	96.67	96.67	
		MERCHANDISE: TOTAL(USD): CREDIT INVOICE. DO NOT PAY.		-96.67 -96.67	
		Ordering Party Tel#: (914) 471-2000 Please note that this credit may be de otherprice reduction that must be prop appropriately reflected in any costs cl you to Medicare, Medicaid or other heal	erly disclos aimed or cha	ed and rges made by	r

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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Invoices Pg 29 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

CREDIT MEMO

CUSTOMER PO#: MCP 1303626

SIEMENS REFERENCE#: 666090748 **SOLD-TO#:** 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE
ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SIEMENS Siemens Healthcare Diagnostics

RETURN SERVICE REQUESTED

3090 Premiere Parkway

Suite 600 Duluth, GA 30097

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE DATE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
996066193	10/10/13	-34.45	Net 30 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	1 PC	10323175 RP405 MEAS CART BG-COOX 750 Price Source:MNO	34.45	34.45	
		MERCHANDISE: TOTAL(USD):		-34.45 - 34.45	
	,	CREDIT INVOICE. DO NOT PAY. Ordering Party Tel#: (914) 471-2000			
		Please note that this credit may be de otherprice reduction that must be propappropriatelyreflected in any costs clyou to Medicare, Medicaid or other heal	erly disclos aimed or cha	ed and	c

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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Pg 30 of 35 Invoices

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

CREDIT MEMO

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: MCP 1303626 SIEMENS REFERENCE#: 666090748

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE
ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE DATE	TOTAL (USD)	PAYMENT TERMS INCO TERMS
996066194	10/10/13	-96.67	Due Upon Receipt CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
002	1 PC	10341179 WASH/WASTE CART PKG Original Material: 118678 Price Source:MNO	96.67	96.67	
		MERCHANDISE: TOTAL(USD):		-96.67 - 96.67	
:		CREDIT INVOICE. DO NOT PAY. Ordering Party Tel#: (914) 471-2000			
		Please note that this credit may be de otherprice reduction that must be prop appropriatelyreflected in any costs cl you to Medicare, Medicaid or other heal	erly disclos aimed or cha	ed and	r

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

Invoices Pg 31 of 35

CREDIT MEMO

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

SIEMENS

CUSTOMER PO#: MCP 1303626 SIEMENS REFERENCE#: 666090749

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE NUMBER	INVOICE DATE	TOTAL (USD)	PAYMENT TERMS	1 12	INCO TERMS
996066195	10/10/13	-164.36	Due Upon Receipt		CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	1 PC	10491449 RP500 MCART LAC 750 TEST Price Source:MNO	164.36	164.36	
		MERCHANDISE: TOTAL(USD):		-164.36 - 164.36	
		CREDIT INVOICE. DO NOT PAY. Ordering Party Tel#: (914) 471-2000			
		Please note that this credit may be de otherprice reduction that must be prop appropriatelyreflected in any costs cl you to Medicare, Medicaid or other heal	erly disclos aimed or cha	ed and	r

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit Invoices Pg 32 of 35

INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 335019256

SOLD-TO#: 10182 PAYER#: 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

	NVOICE	INVOICE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
1 7	IUMBER 72233864	DATE 10/12/13	877.20	Net 30 Days	CIF Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	2 PC	10310323 AQC CARTRIDGE KIT Original Material: 120241 Contract#:400019353, Price Source:CNT Delivery # 1103383788, Shipped on 10/10/13	256.70	513.40	
005	2 PC	10310310 WASH/WASTE CART PKG (3) Original Material: 118677 Contract#:400019353, Price Source:CNT Delivery # 1103383788, Shipped on 10/10/13	181.90	363.80	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		877.20 877.20	

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

Buyer's acceptance of the goods covered by this invoice shall constitute acceptance by the buyer of all terms and conditions of sale stated above and in the Standard Conditions of Sale.

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13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 335019256

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

		The second secon	6. 801521 0.00.00 dipp.
INVOICE INVOICE	TOTAL (USD)	PAYMENT TERMS	INCO TERMS
	TOTAL (USD)		
NUMBER DATE		도로 화가 보다 보다 그 그 그 그는 사람들은 말이다.	
070313060 11/14/13	1.588.00	Net 30 Days	CIF Customer dock
972313260 11/14/13	1,500.00	Net 30 Days	CII Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
003	2 PC	10491448 RP500 MCART LAC 400 TEST Contract#:400019353, Price Source:CNT Delivery # 1103491314, Shipped on 11/13/13	794.00	1,588.00	
		MERCHANDISE: TOTAL(USD):		1,588.00 1,588.00	
		Ordering Party Tel# : (914) 471-2000			

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Please remit all checks to the following address: Siemens Healthcare Diagnostics, P.O. Box 121102, Dallas, TX 75312-1102. Please make electronic payments to Bank of New York Mellon as follows: Wires: ABA 043000261. account name Siemens Healthcare Diagnostics, Account Number 0102453.

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Invoices Pg 34 of 35

13-37725-cgm Doc 282-2 Filed 02/11/14 Entered 02/11/14 15:06:02 Exhibit

INVOICE

SIEMENS

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 **Duluth, GA 30097** RETURN SERVICE REQUESTED

CUSTOMER PO#: 11374

SIEMENS REFERENCE#: 335019256

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

ST FRANCIS HOSPITAL 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE INVOICE T	TOTAL (USD) PAY	MENT TERMS	INCO TERMS
NUMBER DATE			
972316497 11/15/13	877.20	Net 30 Days CII	F Customer dock

LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	2 PC	10310323 AQC CARTRIDGE KIT Original Material: 120241 Contract#:400019353, Price Source:CNT Delivery # 1103495798, Shipped on 11/14/13	256.70	513.40	
005	2 PC	10310310 WASH/WASTE CART PKG (3) Original Material: 118677 Contract#:400019353, Price Source:CNT Delivery # 1103495798, Shipped on 11/14/13	181.90	363.80	
		MERCHANDISE: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		877.20 877.20	

All discrepancies must be reported within 10 business days of receipt of product. Please contact 1-888-588-3916 to report discrepancies.

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13-37725-cgm

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Pg 35 of 35 Invoices

INVOICE

Siemens Healthcare Diagnostics 3090 Premiere Parkway Suite 600 Duluth, GA 30097 RETURN SERVICE REQUESTED

CUSTOMER PO#: 0000017370 SIEMENS REFERENCE#: 340538949

SOLD-TO#: 10182 **PAYER#:** 10182

BILL TO CUSTOMER NUMBER: 10182

ST FRANCIS HOSPITAL ATTN ACCTS PAYABLE ATTN ACCOUNTS PAYABLE 241 NORTH RD POUGHKEEPSIE NY 12601

SHIP TO ACCOUNT NUMBER: 87155

ST FRANCIS HOSPITAL RESPIRATORY THERAPY 241 NORTH RD POUGHKEEPSIE NY 12601

INVOICE	
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LN#/ Cust.PO#	QTY/ UOM	MATERIAL NUMBER / DESCRIPTION	UNIT PRICE	EXTENDED PRICE	TAXABLE
001	4 PC	10315772 PAPER PRINTER THERMAL Contract#:400019353, Price Source:CNT Delivery # 1103584402, Shipped on 12/11/13	2.39	9.56	
		MERCHANDISE: SHIPPING AND HANDLING: TOTAL(USD): Ordering Party Tel#: (914) 471-2000		9.56 80.00 89.56	
			,		
All E					

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